



# BONNER COUNTY PLANNING DEPARTMENT

1500 HIGHWAY 2, SUITE 208, SANDPOINT, ID 83864  
planning@co.bonner.id.us (e-mail)

(208) 265-1458

(208) 265-1463 (FAX)

http://www.co.bonner.id.us/planning/index.html (web page)

## BUILDING LOCATION PERMIT APPLICATION

<b>PROPERTY OWNER:</b> David & Nancy Rathgeber		<b>PERMIT#</b>	
<b>MAILING ADDRESS:</b> 4488 La Canada Rd		<b>PHONE:</b> 760-731-3011	
<b>CITY:</b> Fall Brook		<b>CELL:</b>	
<b>LEGAL DESCRIPTION:</b> Tax #: Section: 24 Township: 35N Range: 3W Site Acreage: 9.124A		<b>E-MAIL (optional):</b>	
<b>Subdivision Name:</b>		<b>Homeowner Built:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If No provide Contractor Registration #:	
<b>Block:</b>		<b>Describe Use of Structure (see attached information sheet):</b> Personal storage	
<b>Lot:</b>		RCE-391	
<b>STRUCTURAL DETAIL</b>	<b>CLASS OF WORK</b>	<b>IS BUILDING SITE:</b>	<b>YES</b> <b>NO</b>
<b># of units</b> 1	<b>New</b> <input checked="" type="checkbox"/>	<b>Within 300 feet of any surface water?</b>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<b># of stories</b> 1	<b>Addition</b> <input type="checkbox"/>	<b>On a 15% or greater slope?</b>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<b>Sq footage</b> 2160 Ft	<b>Remodel</b> <input type="checkbox"/>	<b>Within a subdivision requiring Stormwater plans?</b>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<b>Attached garage sq. footage</b>	<b>Change of use</b> <input type="checkbox"/>	<b>Is the use commercial or industrial?</b>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<b>Type of heating</b>	<b>Other</b> <input type="checkbox"/>	<b>If YES to any of the above, a stormwater and/or erosion control plan &amp; fees are required</b>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<b>APPLICANT/REPRESENTATIVE SIGNATURE:</b> I/We certify that I/We have read and examined this application and know the statements and depictions to be true and correct. I/We certify that the proposed construction will conform to the dimensions and uses shown above and that no changes will be made without first obtaining approval from Bonner County Planning Department. I/We understand that additional information may be necessary for a complete review of this application by the Planning Department, and submission of this application does not constitute approval. I/We further grant permission to Bonner County employees or officials to enter upon the subject land to make examinations or review the premises relative to this application.		<b>AGENCY AUTHORIZATIONS</b> Panhandle Health OR Sewer District Provider No plumbing Local Road Jurisdiction: BCRC	
<b>SIGNATURE OF OWNER(S) OR AUTHORIZED REPRESENTATIVE</b>		<b>Address: Y / N</b>	
<b>DATE</b>		<b>Address/Access Road Name (CTY)</b> 683 Fish Creek Rd	
<b>NOTICE:</b> Nothing in the processing or granting of this permit shall be construed to relieve an applicant from compliance with any other requirements contained within Bonner County Revised Code, Idaho Code, state or federal regulations.		<b>Parcel #</b> RP55ND30241356A	
<b>EXPIRATION:</b> This permit shall expire and become null and void if the building or work authorized by the permit is not commenced within (1) year from issuance or if the building or work is suspended or abandoned at any time after the work is commenced for a period of more than (1) year. A one-time extension of an unexpired permit, not to exceed (1) year, may be granted upon written request by the permittee, provided circumstances beyond the control of the permittee have prevented action from being taken. See 11-101 BCRC for definition of start of construction.		<b>Zoning District:</b> AF-10	
<b>Commencement of construction or time extension to be received prior to:</b>		<b>Flood Zone:</b> X	
<b>Date of:</b>		<b>Panel #</b> 1150E	
<b>Extension granted to:</b>		<b>Development Permit #</b>	
<b>CONDITIONS OF APPROVAL:</b> (For Planner Use Only)		<b>Plans Rec</b> <input type="checkbox"/> <b>Plans Approved</b> <input type="checkbox"/>	
<b>PERMIT APPROVAL:</b> (Permit is considered issued and approved when stamped, signed and initialed by a Planning Department official in this space.)		<b>Fire District:</b> Sage Fire	
<b>BLP:</b> \$ 275.00		<b>Energy Authorization:</b> (After Permit Issuance)	
<b>BV:</b> \$		<b>Receipt #'s</b>	
<b>EC/SW:</b> \$		<b>DATE RECEIVED:</b>	
<b>DP:</b> \$		<b>Call:</b> <input type="checkbox"/> <b>or Mail:</b> <input type="checkbox"/>	
<b>COMM/PUBLIC:</b> \$			
<b>TIME EXT:</b> \$			
<b>TOTAL FEES:</b> \$			

# BUILDING LOCATION PERMIT PAGE 2 - SITE PLAN

OWNER: DAVID RATHGEBER

PANHANDLE HEALTH:

5/10/10

PERMIT#:

COMPLETE THE SITE PLAN BELOW, DEPICTING THE FOLLOWING:

- ☐ Property lines of the property to be developed
- ☐ Location of front door & dimensions of proposed structure
- ☐ Locations and uses of all existing and proposed structures
- ☐ Septic tanks, leach fields and wells, if applicable
- ☐ All bodies of water within 300 feet of the proposed building site and any wetlands on site.
- ☐ Distance from property lines to architectural projections for all proposed structures
- ☐ All public or private roads providing access to the site; indicate primary access.
- ☐ All easements of record (utility, road, etc)

Signature of Owner/Authorized Representative

05-06-10

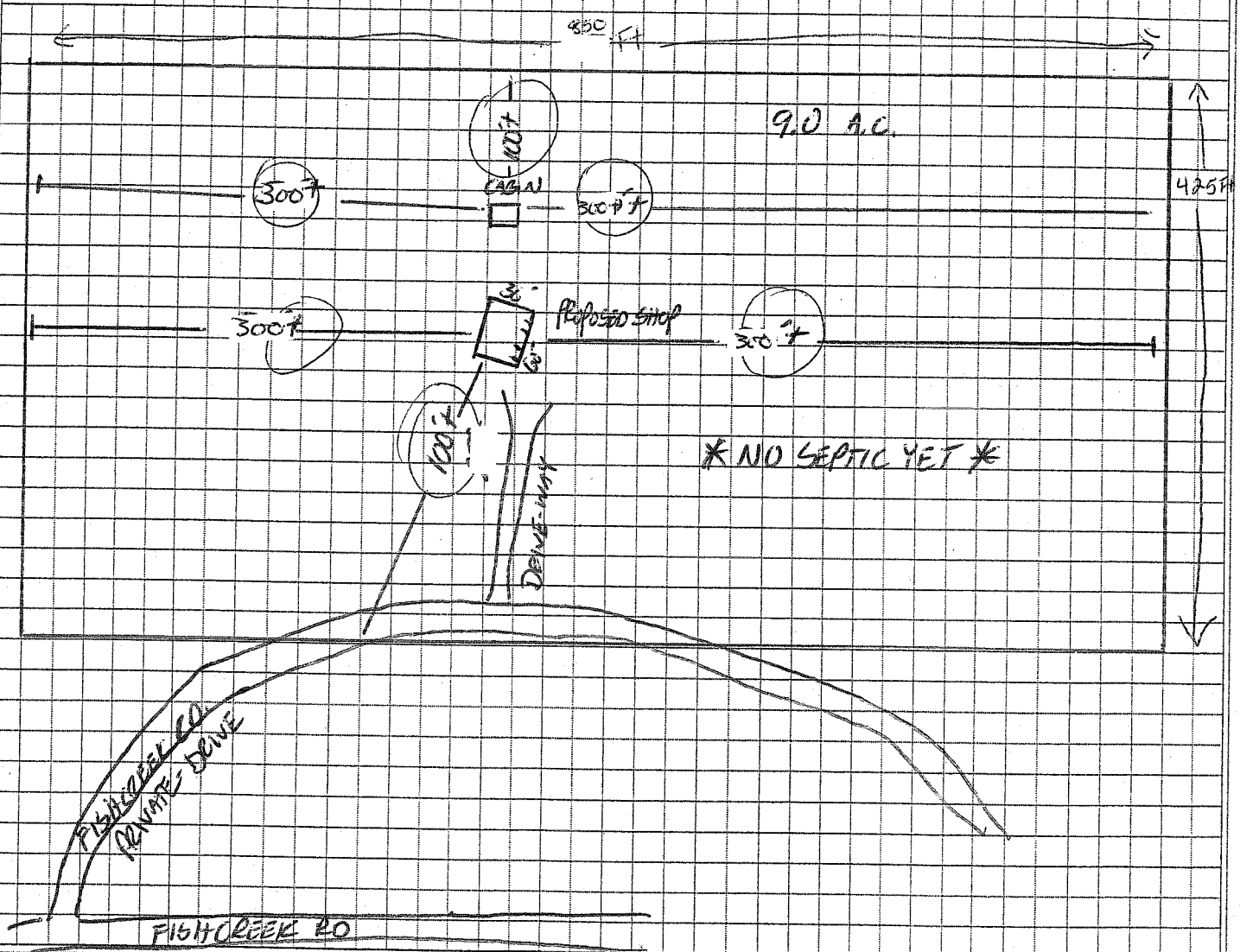
Date

Direction to site: 45 SOUTH TO COCOLALA LOOP RD - (LOWER LOOP RD) TURN (R) TO FISHCREEK RD  
GO APPROX 1.5 MILES LOOK FOR A GUINAC NAILED TO TREE THATS THE PRIVATE DRIVE, DRIVE  
WAY TO SHOP IS APPROX 500 YARDS ON LEFT.

INDICATE  
NORTH IN  
CIRCLE



PARCEL # R P 55 N 03 W 24 13 56 A



PARCEL HISTORY/COMMENTS: (For office use only)

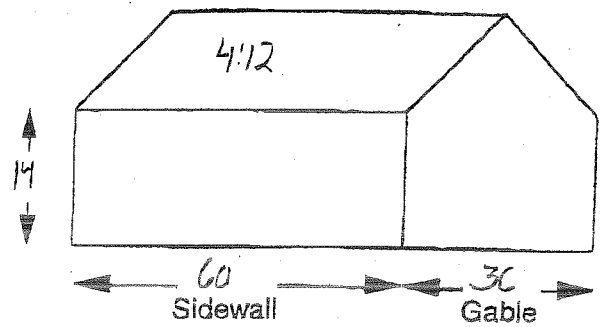
DATE RECEIVED:

# STEEL STRUCTURES AMERICA, INC.

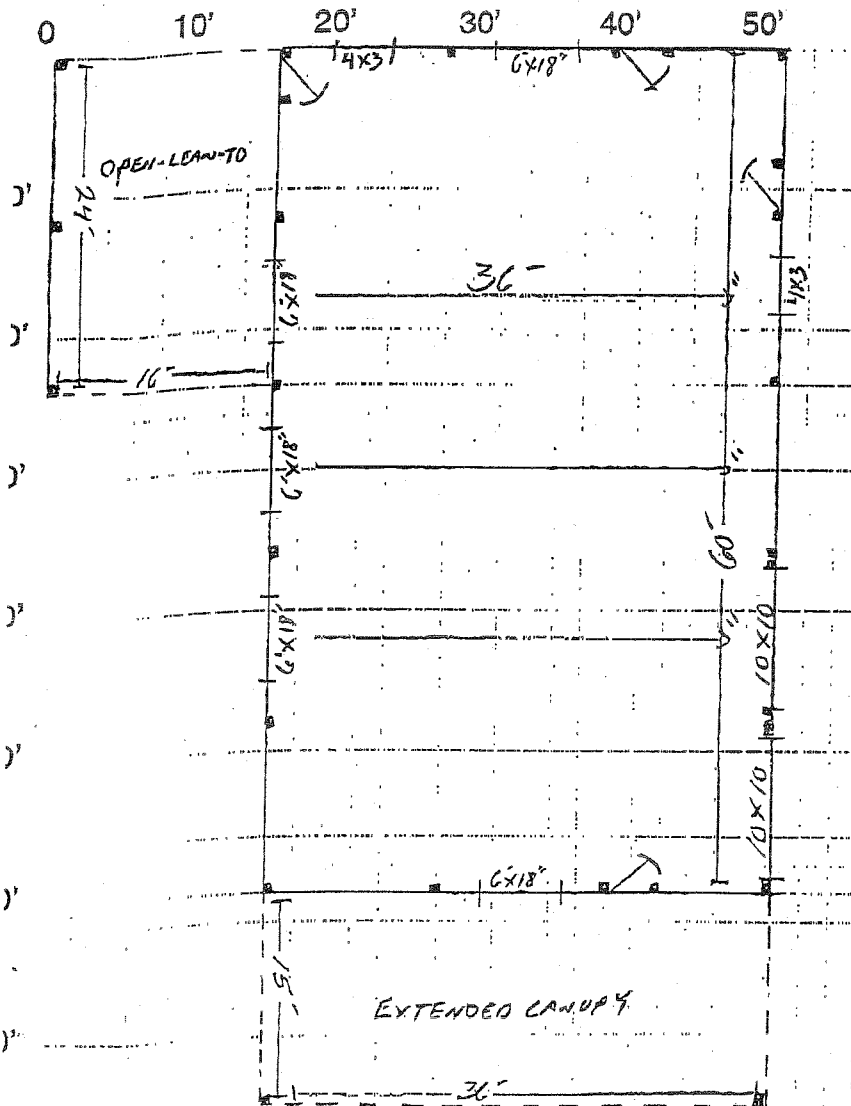
1-800-833-9997

Name DAVID RATHGEBER  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Job Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
County \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone Home \_\_\_\_\_ Work \_\_\_\_\_

Appt. Time \_\_\_\_\_  
Date \_\_\_\_\_



Building Size 36 x 60 x 14



**PHD Conditions**  
Shop - no plumbing  
Ante Duval 5/10/10

PHD Ante Duval  
5/10/10

Own \_\_\_\_\_

Customer Signature Nancy Rathgeber

Sales Sig \_\_\_\_\_